Physician Recruitment Agency of Saskatchewan/ Health Careers in Saskatchewan

Annual Report for 2015-16

saskatchewan.ca

Government of Saskatchewan

Mission

Our mission is to promote and support a collaborative environment that attracts and retains the healthcare workforce in Saskatchewan. We do this by:

- promoting Saskatchewan as a province where you can live, work and play;
- working with system partners to recruit a strong and balanced healthcare workforce that supports cohesive care teams;
- serving as a point of contact for employers and recruits;
- recruiting, screening, advising, assisting and matching potential candidates;
- creating a more efficient recruitment environment that lessens competition among recruiting organizations;
- collaborating with regional health authorities, communities, physicians, health professionals, professional associations and Saskatchewan trained graduates to develop sustainable recruitment and retention in the province;
- promoting and supporting effective policies; and,
- helping Saskatchewan graduates pursue careers in the province.

Vision

We put patients first by making Saskatchewan a preferred choice for a dynamic healthcare workforce. This vision encompasses several ideals that include:

- an appropriate supply, mix and distribution of the health workforce to ensure stable, professional communities;
- sustainable recruitment and retention models that are effective, collaborative and easily accessed; and,
- Saskatchewan graduates pursuing careers in the province.

Values

Our primary values are: collaboration, integrity and putting patients first.

- Collaboration means engaging physicians, healthcare workers, health regions, communities and many system partners in an open and supportive environment. Collaboration also means building and maintaining relationships and partnerships with key stakeholders provincially, nationally and internationally;
- integrity means encouraging and practicing the highest standards of professional and ethical behavior, and operating in a manner that promotes quality and safety; and,
- putting patients first means measuring success by our impact on the health of Saskatchewan people.

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Letter of Transmittal

The Honourable Dustin Duncan

Minister of Health

I have the honour of submitting the Annual Report of the Physician Recruitment Agency of Saskatchewan/Health Careers in Saskatchewan for the fiscal year ending March 31, 2016.

Karen Lautsch
Assistant Deputy Minister of Health and Board Chair

A Message from the CEO

One of the key measures of organizational effectiveness is adaptive capacity. Effective organizations continually adapt their strategies in response to evolving challenges and opportunities. Over the past year the Physician Recruitment Agency of Saskatchewan (PRAS) has responded to significant changes in the health workforce market.

With respect to the physician recruitment we have significantly scaled back international recruitment activity to allocate more energy to integration of University of Saskatchewan (U of S) medical residents into our medical workforce. We have strengthened our collaborative working relationships with the College of Medicine and the Saskatchewan Medical Association to support earlier resident exploration of practice opportunities throughout the province.

We have welcomed the release of a provincial *Planning Tool for Physician Resources in Saskatchewan* and have begun active dialogue with Regional Health Authorizes (RHAs) about the implications of this plan for their future physician recruitment. We're strongly encouraging RHAs and private medical practices to think "U of S First" in their recruitment activities.

In respect to the Health Careers in Saskatchewan (HCIS) component of our work we have continued to work in collaboration with RHAs to support their recruitment of health professionals in short supply. Attracting and retaining health professionals and skilled workers in rural communities remains our greatest challenge.

We are working collaboratively with Nurse Practitioner (NP) leaders to implement programs that should facilitate more NP practices in rural communities and better support those NPs already serving rural communities.

Across the province, the most persistent workforce challenge is recruiting physicians and other health providers to serve people living in small, rural communities. This situation challenges the PRAS and our partner agencies to more optimally engage the full spectrum of health care personnel through team-based care strategies. This is an opportunity to really test our adaptive capacity. Together I believe we can and will find innovative ways to meet the healthcare needs of all of our citizens.

Dr. Dennis Kendel

Chief Executive Officer

Introduction

This annual report contains information and details on the progress we've made over the past year at recruiting physicians and health care professionals to Saskatchewan through PRAS and HCIS. Collectively, these two business lines are referred to as the Agency.

This report contains information on the progress the Agency has made over the past year on recruiting not only physicians to the province, but health care employees as well. Some of the strategic priorities mentioned in this report fall into both business lines; therefore, their measurements are more broadly defined.

This annual report demonstrates the Agency's commitment to effective public performance reporting, transparency and accountability to the public and its steward, the Government of Saskatchewan.

Overview

The Agency's two business lines are governed by a ten-member Board of Directors, each one appointed by the Government of Saskatchewan through Orders in Council. Board members at the close of the 2015-16 fiscal year included:

1. Karen Lautsch, Assistant Deputy Minister
   Representing: Ministry of Health
   Position on Board: Chair
2. David Fan, CEO, Prairie North Regional Health Authority
   Representing: Health Regions
   Position on Board: Vice-Chair
3. Mike Strachan, Mayor of Torquay
   Representing: Saskatchewan Urban Municipalities Association (SUMA)
4. Alastair MacFadden, Assistant Deputy Minister
   Representing: Ministry of the Economy
5. Judy Harwood, Reeve, Rural Municipality of Corman Park
   Representing: Saskatchewan Association of Rural Municipalities (SARM)
6. Jay Meyer, Executive Director, Saskatchewan Association of Rural Municipalities (SARM)
   Representing: Public
7. Dr. Kent Stobart, Vice Dean University of Saskatchewan (U of S) College of Medicine
   Representing: College of Medicine
8. Dr. Simon Adams
   Representing: Professional Association of Internes and Residents of Saskatchewan (PAIRS)
7) Paule Bertholet
   Representing: Student Medical Society of Saskatchewan (SMSS)
9. Dr. Lise Morin, Physician
   Representing: Saskatchewan Medical Association (SMA)

Board members oversaw the planning and implementation of a number of initiatives over the past year to recruit and retain more health care professionals to the province in both the saskdocs and HCIS business lines.

The Agency has seen an increase in the supply of family physicians to the province over the past year. The efforts of the Agency and its partners in several areas of recruitment have collectively contributed to that growth.

While the increased supply is positive news it is also leading to an oversupply of physicians to the province in some cases. It is important to note that this is not a

situation unique to Saskatchewan; it is happening all across Canada. Further work remains to ensure the supply and distribution of physicians adequately meets the needs of communities and medical practices.

The Agency continues to recruit health care professionals since it assumed Health Careers in Saskatchewan from the Ministry of Health in 2014. In partnership with the RHAs our focus is on recruiting health care workers that support team-based primary care. Some of the more hard-to-recruit positions in this capacity include registered nurses, licensed practical nurses, nurse practitioners, occupational therapists, physical therapists, continuing care assistants and combined lab/x-ray technicians.

Year in Review

A review of the past fiscal year for the Agency reveals that while we have made progress toward achieving many of the goals, more work remains.

Regarding the recruitment of physicians, we continue to make progress. During the past fiscal year, staff met with RHA representatives to gather and share information related to physician retention. The purpose of the meetings was to review the following with each region:

- its most significant physician retention challenges;
- what retention policies and strategies seem to be working well; and,
- what options could be considered to make retention even better.

The information gathered from those meetings was compiled and shared with each RHA as a way to improve retention rates well into the future. Retention information, physician supply and distribution was shared with each region. Saskatchewan and several other provinces are starting to reach a state of reasonable physician supply due to the continued recruitment efforts and increasing retention rates. The challenge for the Agency from this point forward will be to more accurately match the right physician with the right practice or community.

The recruitment and retention of all other health care professionals to this province continued through the 2015-16 fiscal year. Agency staff worked closely with senior leadership and recruiters from each of the province's health regions to engage with graduates from universities and technical schools in Saskatchewan and Canada to help fill hard-to-recruit positions.

Staff also worked toward increasing the presence of the HCIS brand, raising awareness of the hard-to-recruit positions; following up with potential recruits; and, nurturing the Agency's relationship with the RHAs.

Alignment with Strategic Direction

Agency activities closely followed priorities to recruit and retain an effective health workforce. The activities in both business lines focused on strategic priorities identified in the 2013-16 strategic plan, which were:

1) meeting the needs of Saskatchewan's health care workforce;
2) improving physician retention in Saskatchewan;
3) building upon our relationship with the University of Saskatchewan's (U of S) College of Medicine;

4) meeting the needs of Saskatchewan's physician workforce; and,
5) communicating effectively with our stakeholders.

Each priority had action items and metrics that monitored our progress. While every effort went into ensuring the activities worked toward an achievable outcome, external influences and pressures beyond the Agency's control may have influenced the results.

Because these priorities from the 2013-16 strategic plan were already underway at the beginning of the 2015-16 fiscal year, the majority of information within this report aligns with them. Agency board and staff met late in the 2015-16 fiscal year to start drafting a new strategic plan to guide their efforts over the next several years.

Progress in 2015-16

Meeting the Needs of Saskatchewan's Health Care Workforce

The demands and requirements to meet the needs of Saskatchewan's health care workforce are many. Delivery of a province-wide system to over one million people is complex and dynamic, and therefore requires close collaboration between many individuals, agencies and organizations.

The Agency collaborates with many partners to help meet the health workforce needs of this system. When the Agency helps recruit and retain physicians to the province, it does so in close consultation with key stakeholders like the Saskatchewan Medical Association (SMA), College of Physicians and Surgeons of Saskatchewan (CPSS), the U of S College of Medicine, RHAs, communities and practicing physicians. Each staff member worked hard at nurturing existing relationships with individuals from each of these organizations and the efforts have paid off. Saskatchewan has more physicians practicing than ever before; and, retention rates for U of S medical graduates are increasing. While the constant demand for physicians continues, so will the work to recruit them.

Staff at HCIS took a similar, collaborative approach by building upon existing relationships with recruiters in each of the RHAs and senior leaders from the health professions at Saskatchewan Polytechnic and the U of S. Recruiting health care professionals is somewhat different from physicians, as most health care professionals have recently graduated. Also, training programs for a number of different disciplines are all unique so each discipline, in some respects, requires a unique recruitment approach.

Saskatchewan continues to be a place that many students studying health disciplines continue to call home. There are more Registered Nurses (RNs), Licensed Practical Nurses (LPNs) and Registered Psychiatric Nurses (RPNs) practicing in the province. While numbers in some disciplines continue to climb, there remains a high demand for professionals in the therapies (Occupational and Physical), Medical Lab Technology and Continuing Care Assistant programs. We will continue to work with professional associations in each discipline, the RHAs and many other employers to access talent to help meet demands.

The following action items (1.1-1.10) outline the progress made on this priority.

Action 1.1 – Collaborate with key stakeholders to identify workforce needs

Agency staff worked closely with staff in each of the province's health regions to recruit health care personnel that support collaborative, team-based care.

This collaborative approach to recruitment has worked well. It is especially effective for rural health regions with limited resources.

Over the past year, HCIS staff and regional recruiters attended more than 50 career fairs in Saskatchewan and select provinces throughout Canada. The Agency once again partnered with Marskell Health Careers Interaction, a company that coordinates health career fairs in larger Canadian cities.

When the Agency recruits physicians, it does so in close collaboration with RHAs across the province. Doing so ensures Saskatchewan people have improved access to physicians in urban, rural and remote locations throughout the province. In the 2015-16 fiscal year the number of licensed physicians in the province increased by 151.

Further progress on this action included the release of *The Planning Tool for Physician Resources in Saskatchewan* was released late in the fiscal year. The tool is a navigational aid, not a prescriptive plan, that will help determine the right mix and supply of the physicians we need to 2023.

Action 1.2 – Develop and implement a plan to recruit and retain health care workers for hard-to-recruit positions

There has been a noticeable increase to the pool of qualified candidates of both physicians and health care employees. One of the reasons for this increase is the Agency supporting local graduates in many disciplines and specialties and connecting them with potential employers.

There will continue to be a higher demand for specialists and hard-to-recruit professionals in the year ahead, particularly occupational and physical therapists, combined lab/x-ray technicians and RPNs. Staff will continue to engage with recruits in each of these disciplines through advertisements and career fairs.

Action 1.3 – Analyze retention efforts to determine areas for improvement

Work continued on closely examining retention strategies over the past fiscal year to better match physicians with available opportunities. One of the areas staff focused on was ensuring that all U of S Family Medicine residents were aware of opportunities available to them well in advance of graduation.

The Agency developed an online guide to help these physicians step into the right career. The guide – *Step Into Your Medical Career in Saskatchewan* – provides a methodical approach for family medicine residents to match with a suitable community that meets their personal and professional needs. The steps were shared with residents at events and are available online.

The Agency continued to administer return-of-service (ROS) contracts with physicians on behalf of the Government of Saskatchewan. The ROS contracts range in length dependent upon a number of factors. Overall they have helped reduce physician turnover in rural and remote areas of the province.

Action 1.4 – Obtain new hire data from employers to evaluate recruitment efforts

Agency staff engaged with partners to find out how many people have been hired over the past year and in what professions. Ongoing work in sharing this data includes developing data sharing agreements, privacy regulations and analyzing results to forecast recruitment needs in the years ahead.

The Agency continues to work with the SMA on jointly sponsoring physician surveys. These surveys go out to physicians who recently began practicing, those who have left, and those that are currently in training at the U of S. More detail on these surveys and how we used the data from them is contained in Action 2.7.

Action 1.5 – Promote the development of a provincial recruiter network

Agency staff met regularly with recruiters from each of the province's health regions. Recruiter network meetings have strengthened working relationships and have become a great resource to share information and learnings.

Action 1.6 – Automate the HCIS job feed to saskjobs.ca

All career opportunities on the HCIS website are loaded into an automated system that allows regional recruiters to post from within their organization. The posting automation has greatly reduced the burden that was traditionally put on regional recruiters who had to manually post career openings.

This automation also feeds the saskjobs.ca website creating a larger audience reach.

Action 1.7 - Manage HCIS in close consultation with RHAs

Staff from HCIS work closely with regional recruiters to jointly coordinate career fair attendance at provincial and national events. The information and feedback obtained from these recruitment events, as well as the contacts made at each one, is shared with recruiters so that employment offers can be made and a post-event analysis can be completed to determine if they warrant future attendance.

Action 1.8 – Work with PRAS Board of Directors to discuss visioning options for two business lines

The Agency's two business lines have been operating independently since January 2014. Initial work was completed over the past fiscal year as to how the two lines could be incorporated into one. The Agency's Board of Directors passed a motion early in the 2015-16 fiscal year to temporarily postpone this alignment.

Action 1.9 – Provide leadership with options to balance and deliver two business lines

Due to the postponement of the business line alignment no work on this specific action occurred during the past fiscal year.

Action 1.10 – Develop and deliver potential business line strategy

The Communications Manager worked closely over the past fiscal year with its Agency of Record to draft a rebranding strategy. This strategy would take into account the existing business lines' brands; the pros and cons of a new, single brand; and, the costs associated with implementing the strategy.

Improving Physician Retention in Saskatchewan

While retention rates are stable in Saskatchewan, efforts to improve them continue. These efforts would not be possible without support from the province's health regions, SMA, U of S College of Medicine and communities in which the doctors are practicing. This collaborative approach to retention is pivotal to its success. Without the support and buy-in of these key partners, retention efforts would be difficult.

This is not a challenge unique to Saskatchewan. Physician retention is a common problem among other western provinces. When working with western counterparts in British Columbia, Alberta and Manitoba we find that all provinces face the same challenges in retaining physicians in rural or remote communities.

The Agency's efforts regarding physician retention revolve primarily around helping communities settle physicians and their families to a new or established practice.

In 2013, the Agency participated in a workshop that involved the Ministry of Health, communities, RHAs and physicians that explored ways to standardize physician settlement practices in all of the health regions.

The following action items were (2.1-2.9) developed from that initial workshop in 2013.

Action 2.1 – Identify pilot sites to develop community retention models

A visual tool was tested in two health region pilot sites with the support of health region staff and the communities themselves. The two pilot sites were Eston (Heartland Health Region) and Weyburn (Sun Country Health Region). Staff members in these regions were asked to use the visual tool and provide feedback as to whether or not it assisted with overall physician retention efforts.

Follow-up surveys of both the physicians and the members of each community were conducted. Survey results revealed that the physicians were very pleased with the level of support that they received to settle into their new environment.

Action 2.2 – Assist communities with the establishment of physician retention committees

saskdocs staff attended both the Saskatchewan Urban Municipalities Association (SUMA) and Saskatchewan Association of Rural Municipalities (SARM) conventions in 2015. Attending these events allowed staff to connect face-to-face with community leaders to talk about the benefits of forming volunteer committees and how current committees can improve retention efforts.

Action 2.3 – Conduct quarterly audits of pilot site(s)

Follow up feedback obtained from the pilot sites in the 2015-16 fiscal year indicates that an informal audit of the initiative is required.

Action 2.4 – Host a provincial recruitment committee event

This action item did not occur during the 2015-16 fiscal year.

Action 2.5 - Coordinate incentive information sharing with health regions

The Agency's CEO and select staff engaged with the leadership community in each of the province's health regions in 2015-16 to share recruitment incentive information. The only exceptions to this engagement activity were the three northern regions serviced through Northern Medical Services (NMS).

While the Agency collected and shared the incentive information with all regions, it will continue to provide assistance to regions and communities that contact the office for further support on physician retention.

Action 2.6 – Develop a communication strategy for community retention models

The communication strategy to share the retention information revolved primarily around face-to-face meetings with the leadership communities in each of the province's health regions. Members of these communities included RHA Board Chairs, Senior Medical Officers and key staff that are integral to physician retention in each region.

In addition to meeting with each of the regions, staff also compiled the data into a report format and shared it at the end of the fiscal year with participating regions.

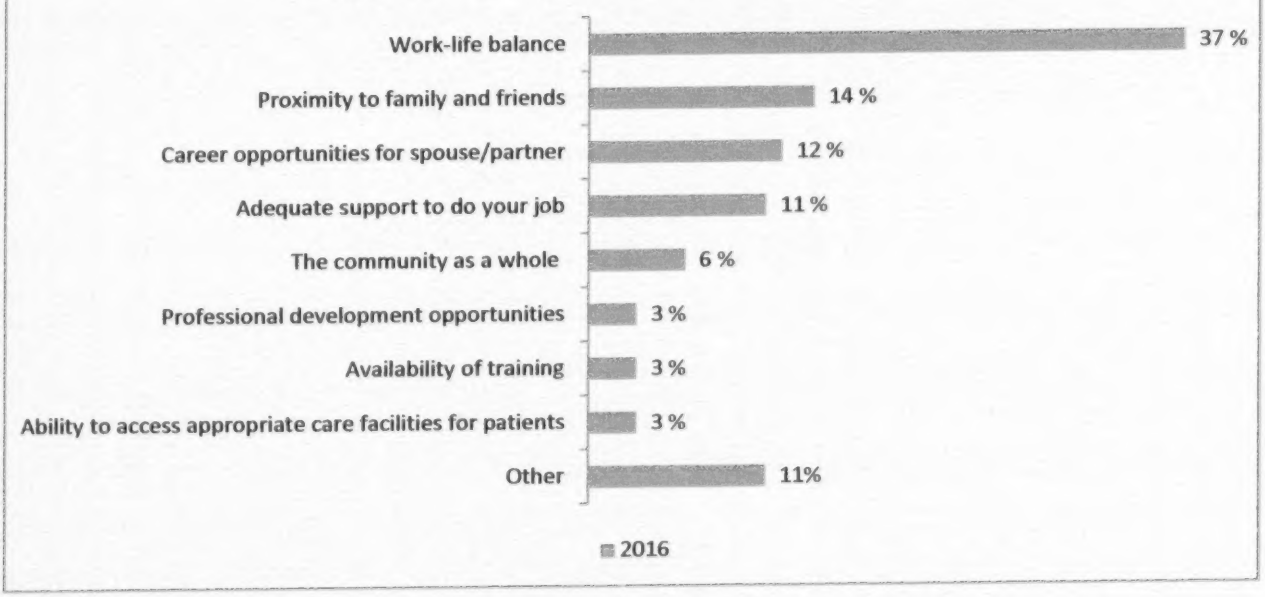
Action 2.7 – Continue physician surveys

The regular physician surveys, co-sponsored by saskdocs and the SMA that began in 2012 continued. Three different types of surveys were used to gather data to help the Agency and its partners determine the effectiveness of current programs and initiatives, and areas we can improve upon.

1. Physician Settlement Surveys

   Settlement surveys are sent to newly recruited physicians within their first year of practice. The objective of these surveys is to gain a better understanding of the physicians who choose to call Saskatchewan home. The

Figure 1 - Medical Learner Surveys
Most Important Factor When Choosing a Practice Location



November 2015 survey of new practicing physicians revealed that that assistance in securing spousal/partner employment continues to be an important factor in their decision to remain practicing in Saskatchewan. These findings are similar to the results from previous settlement surveys.

2. Medical Learner Surveys

Medical learner surveys were sent to U of S medical students and residents in 2012, 2013, 2014 and 2016. As in previous surveys, the most important factor when choosing a practice location was work-life balance (37%), followed by proximity to family and friends (14%). These choices in addition to many others are indicated in Figure 1.

3. Exit Surveys

Exit surveys are sent to all physicians who left the province. The main objective of this survey was to understand why physicians left the province. A total of 387 surveys were sent and 76 responses were gathered. The top three reasons for leaving Saskatchewan include: being closer to family (36%); being dissatisfied with the workplace (20%); and, the weather (19%). Overall, the likelihood of some of these physicians who are considering moving back to Saskatchewan has increased from 24% to 40%. The results of the exit surveys will be watched closely as staff and key stakeholders continue to pursue those who have shown an interest in returning to practice medicine in the province.

Action 2.8 – Develop a centralized website to share information

This action was completed during the 2015-16 fiscal year. Physician retention best practices, a handbook on physician retention and other items related to physician recruitment and retention were posted in a secured section of the saskdocs.ca website so that specific users can access them at their own disposal.

Action 2.9 - Develop a physician resource guide

Further to Action 2.8 a physician resource guide was developed and posted on a private page on the saskdocs.ca website so select users could access the information at their own disposal.

Guide resources, in addition to the retention handbook, included specific questions and answers that physicians, communities and regions may have about retention.

Building upon our relationship with the University of Saskatchewan's College of Medicine

The University of Saskatchewan's College of Medicine trains and prepares many medical graduates each year to practice medicine in Saskatchewan. Due to the high demand for physicians across Canada and the world, these graduates have many choices in which to live and work.

The Agency worked closely with the SMA, RHAs, practicing physicians and communities to keep more U of S medical graduates in the province. One of the most effective ways to ensure our own medical graduates stay working in the province is to let them know about the opportunities available. We do this by engaging with them one-on-one at career events, academic half days, professional development events and direct meetings.

Over the past year, Agency staff committed to meet with medical residents who were close to completing their training to ensure they matched to a practice and community that was right not only for them, but for the community as well.

Regarding family physicians, the College of Medicine offers a valuable program through a Distributed Medical Education (DME) model. This model allows family medicine residents to train and practice in health centres and communities outside of Saskatchewan's two largest centres: Saskatoon and Regina. The rural exposure these students gain at these sites not only provides more exposure to rural practices, but it also gives the region and communities access to these physicians to let them know about the benefits of living and working there. The Agency will continue to support the DME sites and work with the College and SMA to welcome medical residents to these locations.

Finally, a critical program that the Agency administers and manages closely with the College of Medicine is the Physician Recruitment Agency of Saskatchewan's Rural Externship Program, more commonly referred to as PREP. This summer program gives U of S medical students between their second and third years of study, an opportunity to shadow a practicing physician in a rural or remote community anywhere in Saskatchewan. This program gives the medical student valuable, practical experience and gives the region and community a chance to welcome the medical student to the community. It also shows the benefits of living and working there after completing medical school. The PREP program posted another successful year in 2015 and continues to gain momentum through increased participation year after year.

The following action items (3.1-3.10) outline the progress the Agency has made over the past fiscal year on building and nurturing its relationship with the College and recruiting medical graduates from its programs and specialties.

Action 3.1 – Work with the U of S College of Medicine to influence recruitment and retention of local medical graduates

A strong working relationship has been established with the College, which has allowed Agency staff to present at academic half-days within each discipline on a consistent basis.

These half-days give medical residents an opportunity to not only learn more about medicine, but also to hear directly from Agency staff about career prospects in their field, the outlook of a particular discipline and the communities in which the opportunities are located. The Agency will continue to present when time is made available to its staff at these events.

In partnership with provincial employers, Agency staff attend resident retreats held throughout the year at various locations throughout the province.

Action 3.2 – Establish relationships with College department heads

The Agency's CEO continued to build on the existing relationship with key leaders from the U of S College of Medicine.

In addition to having a College representative on the Agency's Board, the CEO met regularly with the Dean of Medicine, Associate Deans, and department heads to nurture professional relationships.

Action 3.3 – Work with the U of S College of Medicine to improve the recruitment and retention of U of S medical graduates

The Agency works closely with the College of Medicine to profile U of S graduates who have decided to stay in Saskatchewan after graduating. These profiles are shared in newsletters, on both the Agency and College's websites and on various social media platforms like Facebook, Twitter and LinkedIn.

The profiles highlight the physicians, their families and the reasons why they chose to stay and practice medicine in Saskatchewan.

The Agency also ensures that every U of S medical resident is aware of the opportunities available to them in Saskatchewan via direct messages sent to each resident as positions are posted.

In the previous fiscal year the Agency and key stakeholders streamlined the processes to match family medicine residents with opportunities well in advance of their program completion dates. The advance notice assists the employers with forecasting recruitment needs and ensures family medicine residents have ample time to choose the right practice location.

Action 3.4 – Align rural experiences for undergraduate medical students

The Agency works closely with the College of Medicine, SMA, NMS, health regions and communities to deliver PREP. A total of 208 U of S medical students have experienced PREP since 2011.

The Agency also supports the SMA's Rural Roadmap Tour. The tours take medical students to communities throughout the province. This gives students an opportunity to see medical practices in communities that they may wish to locate to after graduating from medical school. Some of the Roadmap Tours the Agency participated in over the past year included Weyburn (Sun Country Health Region) and Melfort (Kelsey Trail Health Region).

Action 3.5 – Encourage Canadian medical students to match to U of S via the Canadian Residency Matching Service (CaRMS)

Agency staff attended career fairs, private functions and professional development events to connect with medical students from other universities interested in choosing Saskatchewan through the CaRMS matching process. All medical residents in Canada have to apply to a residency program in Canada via CaRMS.

The Agency also reached out to U of S medical graduates completing their residencies in other provinces. Over the past year, staff attended events in Quebec, Ontario, Alberta and British Columbia to connect with these residents encouraging them to consider opportunities in their home province.

Action 3.6 – Recruit U of S alumni to Saskatchewan

Agency staff once again hosted informal, private events in select Canadian cities where U of S medical residents are completing their residencies.

Unlike career fairs, these private events give recruiters an opportunity to connect with physicians and their families to tell them more about the opportunities waiting for them in Saskatchewan.

The recruiters provided career information to many individuals. Some of the private meetings took place this past fiscal year in Toronto, Ottawa, Edmonton, Vancouver and Halifax.

Action 3.7 – Build on relationship with U of S College of Medicine career development office

In addition to the Agency's CEO building on the relationship with the leadership team at the U of S College of Medicine, staff work closely with the College's career development office. The collaborative efforts between the two groups mean the Agency can gain access to U of S medical students and residents; meet with them on a consistent basis; and, share career opportunity information with them.

Action 3.8 – Expand online resources for U of S medical trainees

Career opportunities are regularly posted on saskdocs.ca. When this occurs, any U of S medical resident who created a profile in our system receives an automated notification of the opportunity.

Throughout the past year, many medical residents and students had questions regarding career opportunities, student loan interest reimbursement, bursaries and return-of-service commitments. Agency staff developed a list of common questions and answers, all of which were posted in a special section on the saskdocs.ca website.

Application forms and further information on PREP is posted online as well. This allows medical students to find information on the program, the communities, the practices and the partners who deliver the program each year.

Information on other programs is posted online and updated on a regular basis. This includes information on Student Loan Interest Reimbursement, Return-of-Service contracts, the Rural Physician Incentive Program (RPIP), bursaries and grants.

Action 3.9 – Foster Engagement Between Minister(s) of Health, Professional Association of Internes and Residents of Saskatchewan (PAIRS), Student Medical Society of Saskatchewan (SMSS)

As part of an ongoing agreement between the Agency, SMA, SMSS and PAIRS, medical learners were given the opportunity to engage with the Ministers of Health and other provincial health care leaders during the 2015-16 fiscal year.

The opportunity was in the form of a Minister's Engagement Forum, which took place at the Academic Health Sciences Building on the U of S Campus on October 7, 2015. In attendance were U of S medical students and residents, professors, practicing physicians and other leaders in Saskatchewan's medical community. Earlier in the year medical students and residents also met with the Minister of Rural and Remote Health at an informal dinner meeting to discuss issues and topics related to physician employment in Saskatchewan.

The Agency will continue to work with its partners in the future to deliver similar events so that U of S medical students and residents have access to Saskatchewan's health leadership community.

Another mechanism to have the interests of medical students and residents brought to the attention of the Agency is continuing to have both a SMSS and PAIRS member on its Board of Directors. Paule Bertholet and Dr. Simon Adams represented the two groups during the past fiscal year.

Action 3.10 – Support and promote the U of S College of Medicine's distributed medical education (DME) model

The Agency promotes the benefits of DME when it meets with medical students individually or at professional career events. The expertise and exposure given to medical residents at these locations increases the likelihood of these physicians staying in the community upon completion of their residencies.

Agency staff attended and co-sponsored welcoming events at each DME site over the summer months and made presentations to medical residents at these locations when possible. The DME sites in Saskatchewan are in North Battleford, Swift Current, Prince Albert, La Ronge, Moose Jaw and Regina.

Meeting the needs of Saskatchewan's physician workforce

Since the Agency began operations in 2011, significant progress has been made to meet the needs of Saskatchewan's physician workforce. The retention rate for U of S medical graduates increased between 2011-12 and 2012-13.

These positive results would not have been possible without the dedication and commitment from Agency staff, health regions, SMA, College of Physicians and Surgeons of Saskatchewan (CPSS), U of S, SCA and community leaders.

As in previous years, the physicians who choose to practice medicine in Saskatchewan, whatever the specialty, indicate that the biggest factor in choosing where they practice is finding work-life balance. Increasing the number of practicing physicians in the province by improving U of S medical graduate retention rates will lead to a more sustainable work-life balance for the physicians who call this province home.

There were several actions taken during the 2015-16 fiscal year to improve provincial physician workforce needs. The progress made on each of the action items (4.1-4.4) is provided on the following pages.

Action 4.1 – Contacting every U of S medical student and resident to make them aware of the available opportunities

Agency staff pledged to contact every U of S medical resident who was close to completing their residency to ensure they knew of the opportunities available to them here in Saskatchewan.

That dialogue continued during the past fiscal year with great success. In addition to contacting medical residents, staff worked closely with medical students.

As indicated earlier in this report, emails are sent out to medical residents advising them of career opportunities as they are posted. This notification system ensures that medical learners who have completed a profile are not only made aware of the opportunity, but also have a chance to apply for it directly through the website.

Career postings are also shared, along with a photo and practice or community profile in which the opportunity is located, on the Agency's social media platforms.

Action 4.2 – Continue to recruit international medical graduates (IMGs)

The Agency works in close collaboration with the health regions and U of S College of Medicine to help administer the Saskatchewan International Physician

Practice Assessment (SIPPA) program.

Since the program started in 2011, more than 220 family physicians have applied, been assessed and gained licensure to practice medicine in Saskatchewan. The SIPPA program has helped the Agency and its partners stabilize the family physician supply in this province, particularly in rural and remote communities.

When SIPPA began five years ago the demand for family physicians was greater. The program had three iterations (intakes) every year with 30 seats in each iteration. Success rates varied for every year and every iteration, as illustrated in Figure 2.

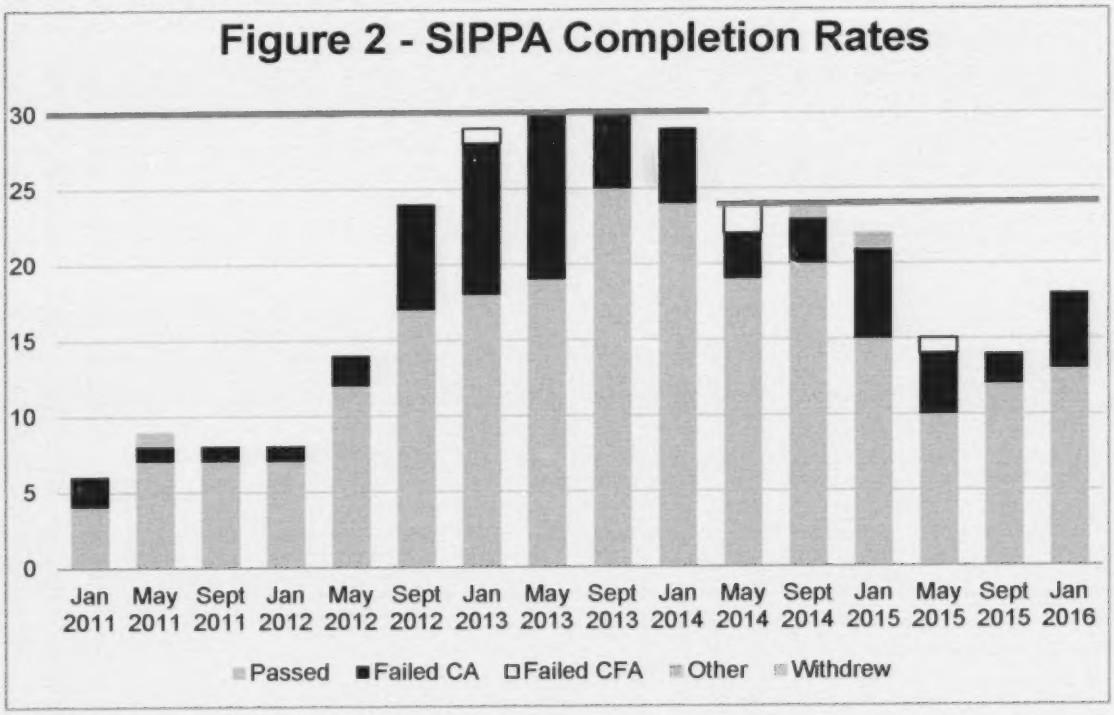
Now that the physician supply has somewhat stabilized across the province the number of seats made available per iteration has been reduced to 24. This new allotment was in place for all three iterations during the 2015-16 fiscal year.

Despite fewer graduates from the SIPPA program, Saskatchewan's physician numbers continued to increase during the 2015-16 fiscal year.

Complementing IMG recruitment efforts was attendance at international career fairs in the United Kingdom, Ireland and the United States. The premiere events in these locations were the British Medical Journal (BMJ) Careers Fair, Irish Medical Careers Fair (IMCF) and the Family Medicine Experience (FMX) hosted by the American Academy of Family Physicians (AAFP).

Each one of these events draws thousands of physicians from across many countries each year. As in previous years Saskatchewan joined forces with its recruitment colleagues in British Columbia, Alberta and Manitoba at all three events. The *Western Canada – Welcome Home* theme has been used for the past four years at each of these events and as a result enjoys a highly recognizable and trusted presence at these prestigious events. The contacts made at each event are shared among the partners, as are the costs.

Figure 2 - SIPPA Completion Rates



Action 4.3 – Develop a Recruitment Plan for high-need specialties as identified in the *Planning Tool for Physician Resources in Saskatchewan*

Agency staff began preliminary work on drafting activities and strategies for specialist physicians over the past fiscal year.

Staff members used the new *Planning Tool for Physician Resources in Saskatchewan* as a navigational aid to help guide the activities and strategies.

The planning tool, released in February 2016, forecasts Saskatchewan's physician needs from 2013-2023. In general, the tool calls for a need to recruit more specialists to the province as opposed to the traditional focus on family physicians. Specialist recruitment strategies will be further defined over the course of the next fiscal year.

Action 4.4 – Continue to recruit Canadian medical graduates

As previously mentioned recruiters from the Agency met at private, one-on-one meetings in various Canadian cities with medical residents and their families completing their training at other Canadian universities. Many of these physicians, some originally from Saskatchewan, want to return home to practice, but are unsure of the opportunities available to them. These meetings gave staff a chance to tell the residents and family members more about the current opportunities and amenities in our communities and health facilities. Staff will plan more of these private functions in conjunction with future career fairs.

Communicate Effectively With All Stakeholders

The Agency has many stakeholders, each with different communication and marketing needs. The Communications Manager looks after all of the communication and marketing activity used to help recruit health professionals.

The majority of communication activity in 2015-16 consisted of publicly reporting results of our recruitment efforts via news releases, newsletters and sharing this information on both the HCIS and saskdocs websites. Agency partners were instrumental in sharing information with a number of different audiences. The Communication branches at the U of S College of Medicine, SMA and RHAs were very helpful in sharing the information with key audiences. These included students at training institutes around the province, medical students and residents, practicing physicians and communities.

A clear focus of our efforts in both business lines was to ensure that all health professionals and medical graduates know about the opportunities available to them. We also profiled those who secured a career opportunity in this province and the benefits of doing so.

There are five action items (5.1-5.5) in this priority related to communications. The progress we've collectively made on each of them is provided on the following pages.

Action 5.1 – Increase collaborative communication activities with key stakeholders

The Communications Manager collaborated with colleagues in each of the province's health regions, the SMA, U of S College of Medicine and Ministry of Health to deliver

news releases, newsletter stories and recruitment or retention information on a regular basis. Some of the collaborative initiatives that were highly successful included news releases announcing more physicians to the province, newsletter stories that profiled health professionals choosing to practice in rural or remote communities in the province, advertising in student yearbooks and sharing stories and website material about highly successful engagement events such as the Minister's Engagement Forum (October 2015) and Saskatchewan-based career days.

The Communications Manager and Communications staff from the SMA shared and edited joint articles that were used both in saskdocs' e-newsletters and the *SMA News Digest*, a quarterly print publication that goes to every SMA member.

The Communications Manager also drafted, edited and jointly prepared profiles of nurses, therapists, managers and other health professionals with health region staff in various communities throughout the province. These profiles were used on the HCIS website, in its quarterly e-newsletters and communication vehicles specific to the health regions.

Action 5.2 – Work with U of S College of Medicine to profile retention of U of S medical graduates

The Agency continued to work with the U of S College of Medicine Communications branch to ensure U of S medical graduates were profiled on both websites, shared in saskdocs e-newsletter and used in various communication vehicles. Each profile highlighted the fact that more U of S trained medical students and residents are deciding to practice medicine in Saskatchewan. The stories also list the reasons why these individuals are staying in the province to work in the health care sector.

Action 5.3 – Profile successful employer-physician matches

As previously mentioned in Action 5.2, physicians and health professionals were profiled on websites, newsletters, social media channels and shared through other communication channels to profile not only the health care provider, but the reason why he or she decided to live and work in Saskatchewan.

While these profiles focused on individuals, they also mentioned and promoted the communities in which the individuals lived and worked. Because the profiles served several purposes they were shared with health care communication colleagues as well as communication contacts. This included the profiles with the Saskatchewan Association of Rural Municipalities (SARM) and Saskatchewan Urban Municipalities Association (SUMA) for use in their communication vehicles as well.

Action 5.4 – Profile established physicians

No progress was made on this action item as significant resources were dedicated to profiling newly recruited health professionals.

Action 5.5 – Increase the presence and profile of the HCIS Brand

Communications worked with HCIS staff and provincial health regions to ensure the HCIS brand was displayed correctly and prominently on all promotional material, advertisements, the website, social media channels and other tools used to ensure the brand

maintained a presence in display materials and at career fairs and events in and out of the province.

Hard-to-recruit positions were advertised in select journals, their associated websites and in key publications that provided the best exposure to graduates. This included advertising the HCIS brand and health care opportunities in journals and online resources specific to the therapies, nursing and continuing care aid professions.

The quarterly HCIS e-newsletter continued its second year of production. In each issue were health care provider profiles, community information, statistics from career fair events that HCIS hosted or participated in, as well as further information on upcoming events.

Management Report

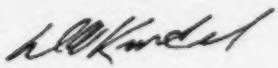
The accompanying financial statements are the responsibility of management and have been approved in principle by the Physician Recruitment Agency of Saskatchewan's Board of Directors. The financial statements have been prepared in accordance with Canadian generally accepted accounting principles and, of necessity, include some amounts that are based on estimates and judgments. The financial information presented in the Financial Summary and elsewhere in this report is consistent with that in the financial statements.

Management maintains an appropriate system of internal control, including policies and procedures, which provide reasonable assurances that the Agency's assets are safeguarded and that financial records are relevant and reliable.

The Board of Directors carries out its responsibility for the financial statements and for overseeing management's financial reporting responsibilities by meeting with management to discuss and review financial matters. The Provincial Auditor of Saskatchewan has full and open access to the Board of Directors.

The Provincial Auditor of Saskatchewan conducts an independent audit of the financial statements. Her examination is conducted in accordance with Canadian generally accepted auditing standards and includes tests and other procedures which allow her to report on the fairness of the financial statements. The Auditor's Report outlines the scope of her audit and opinion.

On behalf of management,



Dr. Dennis Kendel
Chief Executive Officer

PROVINCIAL AUDITOR
of Saskatchewan

July 25, 2016

Mr. D. Kendel
Chief Executive Officer
Physician Recruitment Agency
1-311 Wellman Lane
Saskatoon, SK S7T 0J1

Dear Mr. Kendel:

Re: Physician Recruitment Agency of Saskatchewan
2015-2016 Annual Report

This letter serves as your authority to include the signed auditor's report dated July 22, 2016, in the 2015-2016 Annual Report of the Physician Recruitment Agency of Saskatchewan if no changes are made to the draft Annual Report presented for my review on July 22, 2016, except as follows:

- Add the signed independent auditors report

Yours truly,

Judy Ferguson

Judy Ferguson, FCPA, FCA
Provincial Auditor

/ah

Confidentiality notice. This may contain confidential information exempt from disclosure under *The Provincial Auditor Act*.

1500 Chateau Tower - 1920 Broad Street Regina, Saskatchewan S4P 3V2
t 306.787.6398 f 306.787.6383 e info@auditor.sk.ca
w www.auditor.sk.ca

PHYSICIAN RECRUITMENT AGENCY OF SASKATCHEWAN
FINANCIAL STATEMENTS
For the year ended March 31, 2016

Statement 1

Physician Recruitment Agency of Saskatchewan
Statement of Financial Position
As at March 31

	2016	2015
Financial Assets		
Due from the General Revenue Fund (Note 3)	$ 2,033,845	$ 1,935,585
Accounts Receivable	$ 6,235	10,761
	$ 2,040,080	1,946,346
Liabilities		
Accounts Payable	210,823	83,277
Accrued Liabilities	60,547	36,016
	271,370	119,293
Net Financial Assets (Statement 3)	1,768,710	1,827,053
Non-Financial Assets		
Tangible Capital Assets (Note 4)	175,762	189,745
Prepaid Expenses (Note 5)	28,342	43,804
	204,104	233,549
Accumulated Surplus (Statement 2)	$ 1,972,814	$ 2,060,602

(See accompanying notes)

Statement 2

Physician Recruitment Agency of Saskatchewan
Statement of Operations and Accumulated Surplus
For the year ended March 31

	2016 Budget (Note 9)	2016	2015
Revenue			
Ministry of Health - General Revenue Fund			
Operating Grant	$ 1,900,000	$ 1,500,000	$ 1,500,000
Program Grant (Note 7)	875,000	1,198,663	1,216,613
Interest Revenue	20,000	12,814	21,904
Miscellaneous Revenue	-	961	12,052
	2,795,000	2,712,438	2,750,569
Expenses			
Corporate Services			
Salaries and Benefits	1,367,160	1,264,926	1,196,928
Accomodations	150,869	149,011	141,164
Office Equipment and Supplies	107,435	96,784	124,949
Other	68,000	54,982	66,049
Board	22,110	11,216	11,473
Program	477,827	241,853	308,357
Communications	343,500	188,557	161,756
Grant Programs	850,000	759,876	647,474
Amortization	23,792	31,965	30,043
Loss on Disposal of Capital Assets	-	1,056	-
	3,410,693	2,800,226	2,688,193
(Net Deficit)/Net Surplus	$ (615,693)	(87,788)	62,376
Accumulated Surplus, beginning of year		2,060,602	1,998,226
Accumulated Surplus, end of year (Statement 1)		$ 1,972,814	$ 2,060,602

(See accompanying notes)

Statement 3

Physician Recruitment Agency of Saskatchewan
Statement of Change in Net Financial Assets
For the year ended March 31

	2016	2015
(Net Deficit)/Net Surplus	$ (87,788)	$ 62,376
Acquisition of Tangible Capital Assets	(19,038)	(33,609)
Amortization of Tangible Capital Assets	31,965	30,043
Loss on Disposal of Tangible Capital Assets	1,056	-
Change in prepaid expenses	15,462	(9,655)
(Decrease)/Increase in Net Financial Assets	(58,343)	49,155
Net Financial Assets, beginning of year	1,827,053	1,777,898
Net Financial Assets, end of year (Statement 1)	$ 1,768,710	$ 1,827,053

(See accompanying notes)

Statement 4

Physician Recruitment Agency of Saskatchewan
Statement of Cash Flows
For the year ended March 31

	2016	2015
Cash Flows from Operating Activities:		
(Net Deficit)/Net Surplus	$ (87,788)	$ 62,376
Add: Non-Cash Items		
Amortization	31,965	30,043
Loss on Disposal of Tangible Capital Assets	1,056	-
Decrease in Accounts Receivable	4,526	6,647
Decrease/(Increase) in Prepaids	15,462	(9,655)
Increase/(Decrease) in Accounts Payable and Accrued Liabilities	152,077	(78,857)
Net cash provided by operating activities	117,298	10,554
Cash Flows from Capital Activities:		
Purchase of Capital Assets	(19,038)	(33,609)
Increase/(Decrease) in Due from General Revenue Fund	98,260	(23,055)
Due from the General Revenue Fund, beginning of year	1,935,585	1,958,640
Due from the General Revenue Fund, end of year	$ 2,033,845	$ 1,935,585

(See accompanying notes)

Physician Recruitment Agency of Saskatchewan
Notes to the Financial Statements
For the year ended March 31, 2016

1. Description of Business

The Physician Recruitment Agency of Saskatchewan (the Agency) was established as a Treasury Board Crown Corporation by Order in Council 84/2010 under the provisions of *the Crown Corporation Act, 1993* (Act).

2. Significant Accounting Policies

Pursuant to standards established by the Canadian Public Sector Accounting Board, the Agency is classified as an other government organization. The Agency uses Canadian Public Sector Accounting Standards published by the Chartered Professional Accountants of Canada. These statements do not include a statement of remeasurement gains and losses as there are no relevant transactions to report. The following principles are considered to be significant:

a. Basis of Accounting
The financial statements are prepared on the accrual basis of accounting.

b. Grant Revenue
Grant Revenues recognized in the financial statements in the period in which the grants are authorized, eligibility criteria are met, and reasonable estimates of the amount can be made.

c. Expenses
Expenses represent the cost of resources consumed during the year for operations. Expenses include provision for the amortization of tangible capital assets.

d. Tangible Capital Assets
Tangible Capital Assets are recorded at cost and are amortized over their useful life. Beginning in the year the asset is placed into service, amortization is recorded on a straight line basis using the rates set out below.

Capital Asset Class and Category	Threshold	Estimated useful Life
Leasehold and occupancy improvements	$5,000	lesser of useful life or lease term/occupancy arrangement
System development (IT)	$5,000	10%
Computer hardware	$1,000	20%
Computer software	$1,000	20%
Office furniture and equipment	$1,000	10%

e. Non-financial Assets
Tangible capital and other non-financial assets are accounted for as assets if they can be used to provide services in future periods. These assets do not normally provide resources to discharge liabilities unless they are sold.

f. Measurement Uncertainty

The preparation of financial statements in accordance with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of financial assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of revenues and expense during the reporting period. These estimates are reviewed periodically, and, as adjustments become necessary, such adjustments are reported in the Statement of Operations in the period in which they become known.

3. Due from the General Revenue Fund

The Agency's bank account is included in the Consolidated Offset Bank Concentration arrangement for the Government of Saskatchewan. Earned interest is calculated and paid by the General Revenue Fund on a quarterly basis into the Agency's bank account using the Government's thirty-day borrowing rate and the Agency's average daily account balance. In 2015-16 the average interest rate was 0.60% (2014-15 was 0.92%).

4. Tangible Capital Assets

	Computer software	Furniture and equipment	System development	2016 Totals	2015 Totals
Opening cost	$11,465	$16,491	$256,432	$274,388	$240,779
Additions during the year	-	8,241	10,797	19,038	33,609
Disposals during the year	-	(1,508)	-	(1,508)	-
Closing cost	11,465	23,224	267,229	291,918	274,388
Opening accumulated amortization	11,465	4,838	78,340	84,643	54,600
Amortization during the year	-	2,322	29,643	31,965	30,043
Disposals during the year	-	(452)	-	(452)	-
Closing accumulated amortization	11,465	6,708	107,983	116,156	84,643
Net book value of tangible capital assets	-	$16,516	$159,246	$175,762	$189,745

5. Prepaid Expenses

Prepaid expenses are primarily related to advertising, future participation at conferences and career fairs and the office lease in 2016-17.

6. Related Parties

These financial statements include routine transactions with related parties. The Agency is related to all Saskatchewan Crown agencies such as ministries, corporations, boards and commissions under the common control of the Government of Saskatchewan. Related party transactions for the year ended March 31, 2016, include the following:

	2016	2015
Revenue		
Ministry of Health – Grant and Reimbursement	2,698,663	2,716,613
Ministry of Finance – Interest	12,814	21,904
Expenses		
Ministry of Finance – Pension and Benefits	181,882	176,117
Ministry of Central Services	69,001	66,569
SaskTel	15,069	16,845
University of Saskatchewan	12,894	12,770
Saskatchewan Polytechnic	29,850	27,600
SaskPower	5,345	-
SaskEnergy	2,638	-
Prince Albert Regional Health Authority	752	-
Regina Qu'Appelle Regional Health Authority	500	-
Payables		
Ministry of Finance – Pension and Benefits	-	41,284
Receivables		
Ministry of Finance - Interest	2,716	4,592

The Public Service Commission provides payroll services at no costs.

Routine operating transactions with related parties are recorded at the rates charged by those organizations and are settled on normal trade terms. In addition, the Agency pays Provincial Sales Tax to the Ministry of Finance on all its taxable purchases.

7. Program Grants

Program Grants relate to funding to support three programs:

- The Rural Physician Incentive Program provides grants of $120,000 over five years to recent medical graduates practicing in rural and remote communities
- The Medical Resident Interest Reimbursement Program provides grants to University of Saskatchewan medical residents to offset the interest costs on government student loans during residency

- HealthCareersInSaskatchewan portfolio management program receives funding for the recruitment of the non-physician healthcare workforce

8. Financial Instruments

The Agency's financial instruments include: due from the general revenue fund, accounts receivable, accounts payable, and accrued liabilities. The following paragraphs disclose the significant aspects of these financial instruments.

a) Significant terms and conditions
There are no significant terms and conditions associated with the financial instruments that may affect the amount, timing, and certainty of future cash flows.

b) Interest rate risk
The Agency is exposed to interest rate risk when the value of its financial instruments fluctuates due to changes in market interest rates. The Agency does not have any long-term investments that may be affected by market pressures.

The Agency's receivables and payables are non-interest bearing.

c) Credit risk
The Agency is exposed to credit risk from potential non-payment of accounts receivable. The Agency's receivables are mostly from the provincial government; therefore, the credit risk is minimal.

d) Fair Value
For the following financial instruments, the carrying amounts approximate fair value due to their immediate or short-term nature:

Due from General Revenue Fund
Accounts receivable
Accounts payable
Accrued liabilities

9. Budget Approval

The Agency's budget was approved by its Board of Directors on January 8, 2015.

10. Pension Plan

The Agency's employees participate in the Public Employees Pension Plan, a defined contribution pension plan. Members contributed 5% of salary and the employer contributed 7.5% in 2015-16 (7.5% in 2014-15). The Agency's contribution for this fiscal year was $64,187

($65,171 in 2014-15). The Agency's obligation relative to the pension plan is limited to making the required contributions.

11. Contractual Obligations

The Agency has a lease agreement with Discovery Plaza Inc. Consulting for office space at a monthly rate of $9,463 to October 31, 2017 and then $9,783 until October 31, 2019.

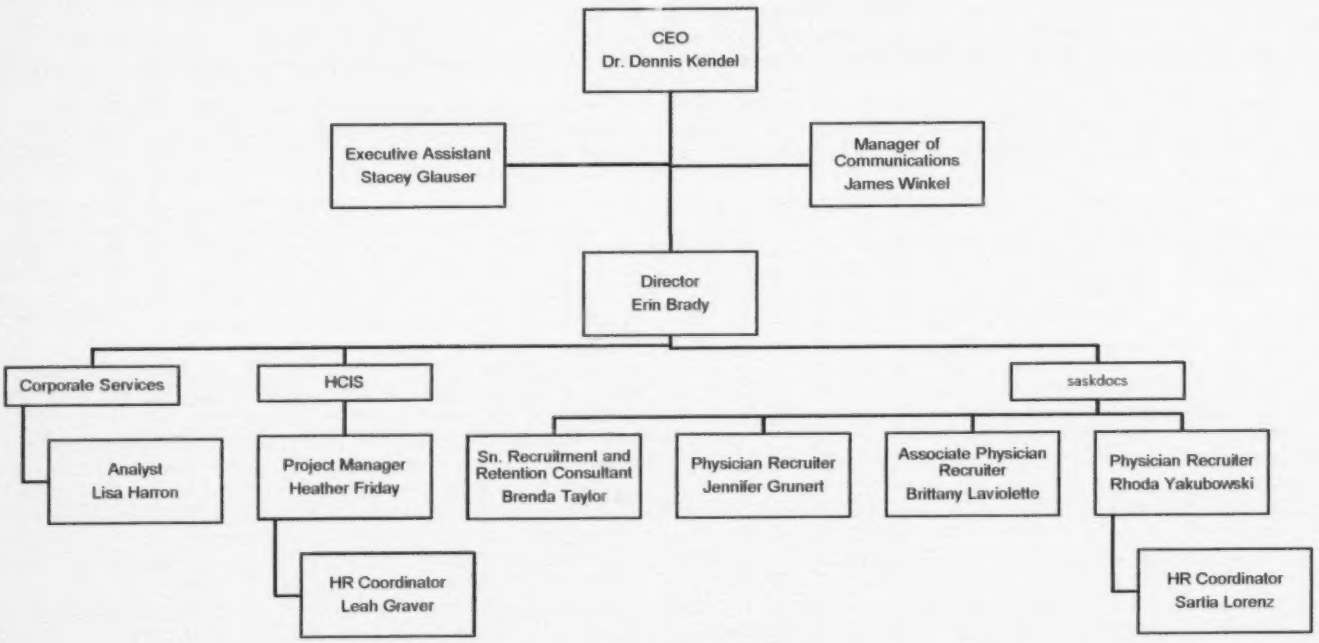
The Agency has agreed with Saskatchewan Polytechnic to sponsor business and industry dinners, career fairs, advertisements and awards promoting health careers in Saskatchewan for $26,000 in 2016-17.

12. Comparative Figures

Certain prior year figures have been reclassified to conform with the current year presentation.

Appendix A

The Physician Recruitment Agency of Saskatchewan
As of December 14, 2015



For More Information

Electronic copies of this annual report are available for download from the Agency's website (www.saskdocs.ca) or by contacting the Physician Recruitment Agency of Saskatchewan (saskdocs) directly at the address below.

Physician Recruitment Agency of Saskatchewan

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